# UTAH REPORTABLE DISEASES

Updated November 2019

UTAH LAW REQUIRES THAT THE FOLLOWING DISEASES BE REPORTED TO THE HEALTH DEPARTMENT

Monday-Friday 8:00 am-5:00 pm: 801-851-7538 or 801-851-2961 Utah County Health Department

**Utah County Emergency Dispatch** 801-794-3970

**After Hours:** 1-888-EPI-UTAH Utah Department of Health

DISEASES WITH THE TELEPHONE SYMBOL MUST BE REPORTED WITHIN 24 HOURS OF A SUSPECT DIAGNOSIS. All other diseases should be reported within 3 working days after identification.

- Acinetobacter carbapenem resistant & carbapenemase producing
- Acute Flaccid Myelitis
- Anaplasmosis
- Anthrax 🌇 or Anthrax-like illness by Bacillus cereus strains that express anthrax toxin genes
- Arbovirus infection
- Babesiosis
- Botulism
- Brucellosis
- Campylobacteriosis
- Candida auris or haemulonii
- Carbapenem-resistant organisms
- Carbapenemase-producing organisms
- Chagas disease
- Chancroid Haemophilus ducrevi
- Chickenpox
- Chikungunya
- Chlamydia
- Cholera
- Coccidioidomycosis
- Colorado Tick Fever
- Creutzfeldt-Jakob disease
- Cryptosporidiosis
- Cyclosporiasis
- Dengue fever
- Diphtheria
- Ebola
- Ehrlichiosis
- Encephalitis any etiology
- Enterobacter carbapenem resistant & carbapenemase producing
- E. coli (non-STEC) carbapenem resistant
- E. coli Shiga toxin-producing (STEC)

- Giardiasis
- Gonorrhea sexually transmitted & ophthalmia neonatorum
- Haemophilus influenzae
- Hantavirus
- Hemolytic Uremic Syndrome post diarrheal
- Hepatitis A 🗃
- Hepatitis B acute, chronic & perinatal
- Hepatitis C acute & chronic infection
- Hepatitis D, E, & Other
- HIV including AIDS
- Influenza Non-seasonal strain
- Influenza-associated hospitalization
- Influenza-associated pediatric death
- Klebsiella carbapenem resistant
- Lassa virus
- Legionellosis
- Leprosy Hansen's Disease
- Leptospirosis
- Listeriosis
- Lyme disease
- Malaria Plasmodium
- Marburg virus
- Measles 🚳
- Meningitis any etiology
- Meningococcal disease
- Middle East Respiratory Syndrome
- Mumps
- Mycobacteria other than tuberculosis
- Neisseria meningitidis
- Nipah virus 🚳
- Norovirus outbreaks only
- Pertussis

- Plague To Yersinia pestis
- Poliomyelitis 🌇 paralytic & non-paralytic
- Psittacosis
- O Fever Coxiella burnetii
- Rabies Thuman & animal
- Relapsing Fever
- Rocky Mountain Spotted Fever
- **Rubella a** excluding congenital syndrome
- Rubella congenital syndrome
- Salmonellosis non-typhi, non-paratyphi
- Salmonella typhi & paratyphi
- Severe Acute Respiratory Syndrome
- Shigellosis
- Smallpox
- Smallpox vaccination adverse event
- Spongiform encephalopathies
- Spotted fever rickettsioses
- Staph aureus vancomycin resistant
- Streptococcal disease invasive, organism isolated from a normally sterile site
- Syphilis all stages, congenital, & syphilitic stillbirths
- Tetanus
- Toxic-Shock Syndrome staph or strep
- Trichinellosis
- Tuberculosis
- Tularemia
- **Typhoid (a)** cases & carriers
- Vibriosis Cholera
- Vibriosis non-cholera
- Viral hemorrhagic fevers
- West Nile Virus
- Zika Virus

#### ALSO REPORTABLE

**Phone** 

801-851-7538

- **Pregnancies** associated with the following diseases, even if the disease was reported to public health prior to the pregnancy:
  - Hepatitis B
     Hepatitis C HIVListeria Rubella Syphilis
     Zika virus infection
- Any exposure/infection that may indicate a bioterrorism event
- Any unusual diseases or outbreaks

A completed morbidity form (page 2) may be mailed, emailed, faxed, or called in (voice mail is confidential) NOTE: Email reports should be sent encrypted through a secure mail system. Unencrypted reports risk breach of confidentiality.

801-851-2961

**Confidential Fax** 

801-851-7539

**Email** Utah County Health Department - Epidemiology viviang@utahcounty.gov 151 South University Ave. Ste #2204, Provo, UT 84601 see note above



### **Utah County Health Department**

151 South University Ave. Ste 2204 Provo, UT 84601 Main Phone: (801) 851-2961 Fax: (801) 851-7539



Ralph L. Clegg, E.H.S., M.P.A. Executive Director Eric S. Edwards, M.C.H.E.S., M.P.A.

UTAH COUNTY HEALTH DEPARTMENT

#### Health Department

	MORBIDITY CARD	BIDITY CARD		CONFIDENTIAL CASE REPORT		
Last Name:	First Name:	Da	ate of Birth:	Age:		
Address:		City:	State:	Zip:		
County:	Phone #1:	PI	hone #2:			
Gender: (check one) F		rican Indian Unknown re Hawaiian or Pacific Island	Ethnicity: (check one Hispanic  Not Hispanic	e) Other Unknown		
Disease:			Date of Onset:			
Name of Laboratory:	Specimen S	Date of Lab Test:	Date of Lab Test:			
Name of Attending Phy	ysician:	Phone:	Phone:			
Pregnant? ☐Y ☐N	EDC:					
 Died? □Y □N	Cause of Death:	Date Expired:	Date Expired:			
Food Handler?	Where?					
Treatment & Dosage C	Given:		Date:			
Other Pertinent Lab Re	esults:					
Notes:						

A completed form may be mailed to the address above or faxed to our confidential line. The information may also be called in. A detailed message may be left on our confidential voice mail.

	Confidential fax					
Vivian	Melody	Curtis	Jennifer	Lisa	Tracy	
Vivian (801)851-7538	Melody (801)851-7354	Curtis (801)851-7053	Jennifer (801)851-7023	Lisa (801)851-7037	Tracy (801)851-7057	801-85

## IF THIS IS AFTER HOURS AND YOU NEED TO REPORT AN **IMMEDIATELY** REPORTABLE DISEASE:

**Utah County Emergency Dispatch** 801-794-3970

**Utah Department of Health On-Call** 1-888-EPI-UTAH

\*Date Reported:

Phone:

\*Name of Person Reporting:

Agency: